IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Gerald McMAHON et al.

Title:

HETEROARYLCARBOXAMIDE COMPOUNDS ACTIVE

AGAINST PROTEIN TYROSINE KINASE RELATED

DISORDERS

Prior Appl. No.:

09/948,090

Prior Appl. Filing Date:

09/07/2001

Examiner:

Unassigned

Art Unit:

Unassigned

CONTINUING PATENT APPLICATION TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION Commissioner for Patents PO Box 1450 Alexandria, Virginia 22313-1450

Sir:

j

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

[] Continuation [X] Division [] Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

Enclosed are:

- [X] Application Data Sheet (37 CFR 1.76) (4 pages).
- [X] Copy of recorded Assignment (9-pages) of the invention to Sugen, Inc. from parent application.
- [X] Specification, Claim(s), and Abstract (149 pages).

- [X] Copy of Declaration and Power of Attorney (4 pages) from parent application.
- [X] Copy of Revocation of Prior Powers of Attorney and Appointment of New Power of Attorney by Assignee Change of Correspondence Address from parent application (2 pages).

The filing fee is calculated below:

	Claims		Included in	j 	Extra				Fee
	as Filed		Basic Fee		Claims		Rate		Totals
Basic Fee						**	\$770.00		\$770.00
Total Claims:	43	-	20	=	23	x	\$18.00	=	\$414.00
Independ ents:	2 .	-	3	_ =	0	x	\$86.00	=	\$0.00
If any Multiple Dependent Claim(s) present: + \$290.00								=	\$0.00
SUBTOTAL:								=	\$1184.00
[] Small Entity Fees Apply (subtract ½ of above):								=	\$0.00
TOTAL FILING FEE:								=	\$1,184.00

- [X] A check in the amount of \$1,184.00 to cover the filing fee is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date

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Respectfully submitted,

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